Debtor 1	ASHLEY		IVEY
505101	First Name	Middle Name	Lasi Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Sankruptcy Court fo	r the: EASTERN DISTRICT (OF MICHIGAN
Case number			
Case number			

Check one box only as directed in this form and in Form 122A-1Supp:				
1. There is no presumption of abuse.				
2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7				

3. The Means Test does not apply now because of qualified military service but it could apply later.

Means Test Calculation (Official Form 122A-2).

☐ Check if this is an amended filing

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

Pa	art 1: Calculate Your Current Monthly Income					
1.	What is your marital and filing status? Check one only. ✓ Not married. Fill out Column A, lines 2-11. ☐ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-	11.				
	☐ Married and your spouse is NOT filing with you. You and your spouse are:					
	Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.					
	Living separately or are legally separated. Fill out Column A, lines 2-11; do not under penalty of perjury that you and your spouse are legally separated under not spouse are living apart for reasons that do not include evading the Means Test re	onbankruptcy law tha	t applies or that you and your			
	Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.					
		Column A Debtor 1	Column B Debtor 2 or non-filing spouse			
2.	Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$_4,316.50	\$			
3.	Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$_0.00	\$			
4.	All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ <u>0.00</u>	\$			
5.	Net income from operating a business, profession, or farm Gross receipts (before all deductions) Debtor 1 \$\frac{105.00}{5} \\$					
	Ordinary and necessary operating expenses -\$_0.00 - \$					
	Net monthly income from a business, profession, or farm \$_105.00 \$ Copy here	\$ <u>105.00</u>	\$			
6.	Net income from rental and other real property Gross receipts (before all deductions) Debtor 1 \$ 0.00 \$ \$					
	Ordinary and necessary operating expenses -\$\(\text{0.00} - \text{\$} \)					
	Net monthly income from rental or other real property \$ 0.00 \$ Copy here		\$			
7.	Interest, dividends, and royalties	s 0.00	\$			

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

ebtor	1 ASHLEY IVEY		Case number (if known)		
	First Name Middle Name Last Name				
			Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
8.	Unemployment compensation		s 0.00	\$	
	Do not enter the amount if you contend that the amounder the Social Security Act. Instead, list it here:		<u> </u>	· · ·	
	For you	\$			
	For your spouse	\$			
	Pension or retirement income. Do not include any a benefit under the Social Security Act. Also, except as not include any compensation, pension, pay, annuity, United States Government in connection with a disab disability, or death of a member of the uniformed sen pay paid under chapter 61 of title 10, then include the does not exceed the amount of retired pay to which y retired under any provision of title 10 other than chap	s stated in the next sentence, do , or allowance paid by the oillity, combat-related injury or vices. If you received any retired at pay only to the extent that it you would otherwise be entitled if	\$ <u>0.00</u>	. \$	
	Income from all other sources not listed above. S Do not include any benefits received under the Socia as a victim of a war crime, a crime against humanity, terrorism; or compensation, pension, pay, annuity, or States Government in connection with a disability, co death of a member of the uniformed services. If nece separate page and put the total below.	I Security Act; payments received or international or domestic allowance paid by the United mbat-related injury or disability, o			
	coparato pago ana par mo total boton.		\$ 0.00	\$	
			\$	\$	
	Total amounts from paparate pages if any		+ •		
	Total amounts from separate pages, if any.		+ \$	T \$	
	Calculate your total current monthly income. Add column. Then add the total for Column A to the total for Column B to the	for Column B.	\$ <u>4.421.50</u>	* \$ 0	Total current monthly incor
40					
12.	Calculate your current monthly income for the yea	55/85			n / /21 5
	12a. Copy your total current monthly income from lin	ne 11		Copy line 11 here	\$ <u>4,421.5</u>
	Multiply by 12 (the number of months in a year).		_	x 12
	12b. The result is your annual income for this part o	f the form.		12b.	\$ <u>53,058.0</u>
13.	Calculate the median family income that applies t	o you. Follow these steps:			
	Fill in the state in which you live.	MI			
	Fill in the number of people in your household.	1		_	
	Fill in the median family income for your state and siz To find a list of applicable median income amounts, g instructions for this form. This list may also be available	go online using the link specified in	the separate	13.	<u>\$63,994.0</u>
14.	How do the lines compare?				
	14a. Line 12b is less than or equal to line 13. On Go to Part 3. Do NOT fill out or file Official F	the top of page 1, check box 1, To Form 122A-2	here is no presump	tion of abuse.	
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A–2.	page 1, check box 2, The presum	ption of abuse is de	etermined by Form 122A	i-2.

Official Form 122A-1

ebtor 1	First Name Middle Name	Last Name	Case number (if known)
Part 3:	Sign Below		
	By signing here, I dec	are under penalty of perjury that the	information on this statement and in any attachments is true and correct. Signature of Debtor 2
	Date 05 29 MM / DD / Y		Date
	If you checked line	14a, do NOT fill out or file Form 122	A-2.
	If you checked line	14h fill out Form 122A-2 and file it	with this form